

AMR CENTRAL MS PATIENT CARE REPORT

DOB: SEX:

CASE #: 61240921 DOS: 11/29/2018

SERVICE MODEL AGENCY AMR	DISPATCH INFORMATION	TIMES
FROM: 81 BLEDSOE ST GRENADA, MS 38901 (HOME/RESIDENCE)	CALLER: LAW ENFORCEMENT UNIT: 708 RESPONSE MODE: LIGHTS AND SIREN ALS ASSESSMENT: AMR EMT-P DISPOSITION: CANCEL ON SCENE-NO PT CONTACT - CANC BY LAW ENFORCEMENT NATURE OF CALL: SICK PERSON/OVERRIDE-DELTA	CALL RECEIVED: 05:55:00 DISPATCHED: 05:55:15 ENROUTE: 05:55:23 AT SCENE: 06:00:07 AVAILABLE: 06:08:07
PATIENT DEMOGRAPHICS		
NAME: ADDRESS: CITY, STATE ZIP: COUNTRY: PHONE: CELL PHONE: SSN: INSURANCE: NO INSURANCE AVAILABLE RESPONSIBLE PARTY: PHONE:	DOB: AGE: GENDER: ETHNICITY:	
NARRATIVE		
NARRATIVE EMS DISPATCHED DUE TO PT BEING TAZED. OUR CONTACT MADE WITH PT.	R ARRIVAL, GRENADA PD HAS PT IN HANDCUFFS IN T	THE PATROL CAR. NO
IMPRESSION		
NO INFORMATION DOCUMENTED.		
HISTORY OF PRESENT ILLNESS		
NO INFORMATION DOCUMENTED.		

RL00210

Exhibit W

NO INFORMATION DOCUMENTED.

MEDICAL HISTORY

Case: 4:20-cv-00220-SA-JMV Doc #: 63-23 Filed: 09/03/21 2 of 4 PageID #: 879Page 4 of 4

CHECKPOINT AUDIT TRAIL

SITE: JACKSON

PCR ID: 2018112906151648411

DATE ENTERED CHECKPOINT		NT CASE	NUMBER	DOS	TOTAL AGE(HRS)	IS TRIP IN CHECKPOINT	
QUEUE NAME	TIMER ENT QUEU	The state of the s	TIME BMITTED	HOURS PRESEN	SUBMITTED/MG	OVED	SUBMITTED METHOD
FIELD NAM	E	OLD VALUE	NEW	VALUE	TIME MODIFIED		MODIFIED BY

DOB: SEX:

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VITAL SIGNS

NO VITALS TO DISPLAY.

PHYSICAL FINDINGS

NO INFORMATION DOCUMENTED.

TREATMENTS

PTA	TIME	CAREGIVER	PROCEDURE
		MATSON JOHN AMP	EACH ITY ACTIVATION ACTIVATION TYPE: NO ALERT

ADDENDUM

DATE	ADDENDUM
06:49:00 11/29/2018	ON OUR ARRIVAL, THE PT IS FIGHTING WITH GRENADA PD WHILE STILL IN HANDCUFFS. EMS UNABLE TO OBTAIN VITAL SIGNS

RUN COMPLETION

NO INFORMATION DOCUMENTED.

PCR ID: 2018112906151648411

DEVICE: SJACMEDS14

PRINTED: 12/4/2018 14:15:13



AMR CENTRAL MS PRE-HOSPITAL CARE REPORT SIGNATURES

CASE #: 61240921

UNIT ID: 708

DATE: 11/29/2018

PRINTED: 12/4/2018 14:15:13

AMR CENTRAL MS CREW MEMBERS

CREW 1

NAME: WATSON, JOHN, AMR

NUMBER: 1012146

CERTIFICATION: PARAMEDIC

CREW 2

NAME: HOWELL, JENNIFER, AMR

NUMBER: 1011016 CERTIFICATION: EMT Moul

PCR ID: 2018112906151648411

DEVICE: SJACMEDS14

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